PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

(1)

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV 22 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000004152

1. Corporation Name

BRIGHTPOINT LATIN AMERICA, INC.

Principal Place of Business	Mailing Address
6402 CORPORATE DR. INDIANAPOLIS IN 46278	6402 CORPORATE DR. INDIANAPOLIS IN 46278

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 99

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 06/10/1994

5. FEI Number: 35-1778566 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $9.75 [illegible]

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CPD	LAIKIN, ROBERT J	6402 CORPORATE DR.	INDIANAPOLIS IN 46278
VP	HOUSEFIELD, T. SCOTT	6402 CORPORATE DR.	INDIANAPOLIS IN 46278
D	DICK, ROLLIN M	11925 N. PENNSYLVANIA ST	CARMEL IN 46032
D	SANDS, STEVEN B	101 PARK AVE	NEW YORK NY 10178
D	WAGNER, ROBERT F	501 INDIANA AVE #200	INDIANAPOLIS IN 46202
PCD	HOWELL, J. M	6402 CORPORATE DR.	INDIANAPOLIS IN 46278

PLEASE SEE ATTACHED

LS

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City — State: FL — Zip Code

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-12/03/99--01015--025
****758.75 ****758.75

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: REQUIRED — VICKY GOLDSTEIN, SPECIAL ASSISTANT SECRETARY — Date: 11-18-99
(REGISTERED AGENT MUST SIGN)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: REQUIRED — 11/16/99 — 317-387-5363
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (8/99)

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Officers and/or Directors
of
Brightpoint Latin America, Inc.

TITLE	NAME OF OFFICER AND/OR DIRECTOR	STREET ADDRESS OF EACH OFFICER AND/OR DIRECTOR	CITY/STATE/ZIP
C/D	LAIKIN, Robert J.	6402 Corporate Drive	Indianapolis, IN 46278
P/D	HOWELL, J. Mark	6402 Corporate Drive	Indianapolis, IN 46278
V/T	BOUNSALL, Phillip A.	6402 Corporate Drive	Indianapolis, IN 46278
V/S	FIVEL, Steven E.	6402 Corporate Drive	Indianapolis, IN 46278
S	DELANEY, John P.	6402 Corporate Drive	Indianapolis, IN 46278
D	DICK, Rollin M.	11825 N. Pennsylvania Street	Carmel, IN 46032
D	SIMON, Stephen H.	115 W. Washington Street, 15th Floor East	Indianapolis, IN 46207
D	SANDS, Steven B.	101 Park Avenue	New York, NY 10178
D	WAGNER, Robert F.	501 Indiana Avenue, #200	Indianapolis, IN 46202
D	ADAMS, John W.	251 N. Illinois Street, Suite 200	Indianapolis, IN 46204
D	STUART, Todd H.	2058 Dr. Martin Luther King Street, P.O. Box 44028	Indianapolis, IN 46244